REQUEST FOR WITHDRAWAL

AS ATTORNEY OR AGENT **AND CHANGE OF CORRESPONDENCE ADDRESS**

	P10/5B/63 (09-					
Application Number	09/977,337					
Filing Date	October 16, 2001					
First Named Inventor	Choong, Philip T.					
Art Unit	2683					
Examiner Name	TROST IV, WILLIAM GEORGE					
Attorney Docket Number	040092-005900US					

P.O. B	nissioner for F ox 1450 ndria, VA 223									
Dlease	withdraw me a	s attorney or agen	t for the above id	Contified pate	nt application, and	, F	RE	CEIV	ED	
Please withdraw file as attorney or agent for the above identified patent application, and										
all	all the attorneys/agents of record						MAR 1 9 20			
☐ all	all the attorneys/agents (with registration numbers) listed on the attached paper(s), or Technology Center									
☑ all the attorneys/agents associated with Customer Number 20350										
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.										
The reasons for this request are: This Request to Withdraw is being filed at the request of the applicant.										
CORRESPONDENCE ADDRESS										
 The correspondence address is NOT affected by this withdrawal. Change the correspondence address and direct all future correspondence to: 										
Custom	ner Number				-					
OR								•		
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Signature	165	2/		Registr	Registration No. 37,692					
Date	March	₂₀₀₄ V			· · · · · · · · · · · · · · · · · · ·					
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.										